

FEE TRANSMITTAL For FY 2001

Patent Fees are subject to annual Revision

Total Amount of Payment (\$)/40.00

Complete If Known

| | |
|----------------------|---|
| Application Number | Not Yet Assigned |
| Filing Date | Herewith (02-06-2002) |
| First Named Inventor | Christopher J. O'Donnell and Brian T. O'Neill |
| Examiner Name | |
| Group/Art Unit | |
| Attorney Docket No. | PC11080A |

METHOD OF PAYMENT

1. ☒ The commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number: 16-1445

Deposit Account Name: Pfizer Inc

☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

☐ Applicant claims small entity status. See 37 CFR 1.27

2. ☐ Payment Enclosed:

☐ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION (continued)

| Fee Code | Large Entity Fee (\$) | Fee Code | Small Entity Fee (\$) | Fee Description | Fee Paid |
|-----------------------------------|-----------------------|----------|-----------------------|--|----------|
| 105 | 130 | 205 | 65 | Surcharge - late fee or oath | |
| 127 | 50 | 227 | 25 | Surcharge-late filing fee or cover sheet | |
| 139 | 130 | 139 | 130 | Non-English specification | |
| 147 | 2,520 | 147 | 2,520 | For filing a request for ex parte reexamination | |
| 112 | 920* | 112 | 920* | Requesting publication of SIR prior to Examiner action | |
| 113 | 1,840* | 113 | 1,840* | Requesting publication of SIR after Examiner action | |
| 115 | 110 | 215 | 55 | Extension for reply within first month | |
| 116 | 400 | 216 | 200 | Extension for reply within second month | |
| 117 | 920 | 217 | 460 | Extension for reply within third month | |
| 118 | 1,440 | 218 | 720 | Extension for reply within fourth month | |
| 128 | 1,960 | 228 | 980 | Extension for reply within fifth month | |
| 119 | 320 | 219 | 160 | Notice of Appeal | |
| 120 | 320 | 220 | 160 | Filing a brief in support of an appeal | |
| 121 | 280 | 221 | 140 | Request for oral hearing | |
| 138 | 1,510 | 138 | 1,510 | Petition to institute a public use proceeding | |
| 140 | 110 | 240 | 55 | Petition to revive - unavoidable | |
| 141 | 1,280 | 241 | 640 | Petition to revive - unintentional | |
| 142 | 1,280 | 242 | 640 | Utility issue fee (or reissue) | |
| 143 | 490 | 243 | 230 | Design issue fee | |
| 144 | 620 | 244 | 310 | Plant issue fee | |
| 122 | 130 | 122 | 130 | Petitions to the Commissioner | |
| 123 | 50 | 123 | 50 | Processing fee under 37 CFR 1.17(g) | |
| 126 | 180 | 126 | 180 | Submission of Information Disclosure Stmt | |
| 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) | |
| 146 | 740 | 246 | 370 | Filing a submission after final rejection (37 CFR 1.129(a)) | |
| 149 | 740 | 249 | 370 | For each additional invention to be examined (37 CFR § 1.129(b)) | |
| 179 | 710 | 279 | 355 | Request for Continued Examination(RCE) | |
| 169 | 900 | 169 | 900 | Request for expedited examination of a design application | |
| Other (specify) _____ | | | | | |
| *Reduced by Basic Filing Fee Paid | | | | | |
| Subtotal (3) | | | | | \$0.00 |

FEE CALCULATION

1. BASIC FILING FEE

| Large Entity Fee Code | Large Entity Fee (\$) | Small Entity Fee Code | Small Entity Fee (\$) | Fee Description | Fee Paid |
|--------------------------|-----------------------|-----------------------|-----------------------|--------------------|---------------|
| 101 | 740 | 201 | 355 | Utility filing fee | 740 |
| 106 | 330 | 206 | 165 | Design filing fee | |
| 107 | 510 | 207 | 255 | Plant filing fee | |
| 108 | 740 | 208 | 370 | Reissue filing fee | |
| 114 | 160 | 214 | 80 | Ring fee | |
| SUBTOTAL (1) (\$) | | | | | 740.00 |

2. EXTRA CLAIM FEES

| | | | | | | | | | |
|--------------------|----|--------|---|--------------|----|----------------|---|----------|---|
| | | | | Extra Claims | | Fee from below | | Fee Paid | |
| Total Claims | 20 | -20**= | 0 | X | 16 | = | | 0 | |
| Independent Claims | 1 | -3**= | 0 | X | 84 | = | | 0 | |
| Multiple Dependent | | | | | | | 0 | = | 0 |

| | | | | | |
|--------------|--------------|----------|-----|---|------|
| Large Entity | Small Entity | | | | |
| Fee Code | Fee code | Fee code | | Fee Description | |
| 103 | 18 | 203 | 9 | Claims in excess of 20 | |
| 102 | 84 | 202 | 42 | Independent claims in excess of 3 | |
| 104 | 280 | 204 | 140 | Multiple dependent claim, if not paid | |
| 109 | 80 | 209 | 42 | **Reissue independent claims over original patent | |
| 110 | 18 | 210 | 9 | **Reissue claims in excess of 20 and over original patent | |
| SUBTOTAL (2) | | | | (\$) | 0.00 |

** or number previously paid, if greater; For Reissues, see above

SUBMITTED BY

| | | | |
|----------------------|----------------------------|-----------------------------------|--------------|
| Type or Printed Name | Kristina L. Konstas | Registration No. (Attorney/Agent) | 37,864 |
| Signature | <i>Kristina L. Konstas</i> | Telephone | 212-733-0380 |
| | | Date | 02/06/02 |

Complete (if applicable)

EXPRESS MAIL NO. EL 768261799 US